Remarks/Arguments

Applicants have received and carefully reviewed the Office Action mailed April 14, 2009. Currently, claims 1, 7, 8, 11-19, 42-48, 50-52, 54-70, and 72-74 remain pending. Claims 1, 7, 8, 11-19, 42-48, 50-52, 54-70, and 72-74 have been rejected. With the Amendment, claims 1, 50, and 72-73 have been amended. Favorable consideration of the following remarks is respectfully requested.

Claim Rejections – 35 USC § 112

On page 2 of the Office Action, claims 1, 7, 8, 11-19, 42-48, 72, and 74 were rejected under 35 U.S.C. 112, first paragraph, as failing to comply with the written description requirements. With regards to claim 1, the phrase "wherein at least one of the first catheter radiopaque marker and the first side member radiopaque marker or the third catheter radiopaque marker and the second side member radiopaque marker are arranged side-by-side in a first configuration, wherein the at least one first side member radiopaque marker and first catheter radiopaque marker or second side member radiopaque marker and third catheter radiopaque marker are separated in a second configuration to indicate that the free distal end of the side member is advancing into the branch vessel" was objected to as lacking original support. Applicants respectfully disagree. However, in an attempt to further clarify the phrase, Applicants have amended the phrase to "wherein the first catheter radiopaque marker and the first side member radiopaque marker are arranged side-by-side in a first configuration and the third catheter radiopaque marker and the second side member radiopaque marker are arranged side-by-side in a first configuration, wherein the first side member radiopaque marker and first catheter radiopaque marker are separated in a second configuration to indicate that the free distal end of the side member is advancing into the branch vessel".

With regards to claim 72, the phrase "wherein the first catheter radiopaque marker and at least one of the side member radiopaque markers are side-by-side in a first configuration and separated in a second configuration" was objected to as lacking original support. Applicants respectfully disagree. However, in an attempt to further clarify the phrase, Applicants have amended the phrase to "wherein the first catheter radiopaque marker and at least one of the side member radiopaque markers are side-by-side in a first configuration and separated in a second configuration".

Support for these elements can be found on, for example, page 4, line 21 through page 5, line 2; page 13, line 21 through page 14, line 2; and page 14, line 28 through page 15, line 7. As such, these elements are believed to have original support and withdrawal of the rejection is respectfully requested.

On page 3 of the Office Action, claims 1, 7, 8, 11-19, 42-48, 72, and 74 were rejected under 35 U.S.C. 112, first paragraph, because the specification, while being enabling for separation of markers near the ends of the catheters, does not reasonably provide enablement for separation of all the markers as suggest by the claims. Applicants respectfully traverse this rejection. As discussed above, the elements of claims 1 and 72 have been amended to provide further clarification. Further, with regards to enablement, MPEP § 2164.01 states:

> Any analysis of whether a particular claim is supported by the disclosure in an application requires a determination of whether that disclosure, when filed, contained sufficient information regarding the subject matter of the claims as to enable one skilled in the pertinent art to make and use the claimed invention. The standard for determining whether the specification meets the enablement requirement was cast in the Supreme Court decision of *Mineral Separation v. Hyde,* 242 U.S. 261, 270 (1916) which postured the question: is the experimentation needed to practice the invention undue or unreasonable? That standard is still the one to be applied. *In re Wands*, 858 F.2d 731, 737, 8 USPQ2d 1400, 1404 (Fed. Cir. 1988). (emphasis added).

Applicants respectfully assert that the present application clearly contains sufficient information to enable one skill in the pertinent art to make and use the claimed invention. For example, page 14, line 28 through page 15, line 7 recites:

> As shown in Figs 15 and 16, catheter 64 is advanced into main vessel MV, and fluoroscopic viewing equipment may be used to fluoroscopically view markers 94, 96, 97, 100, and 102. Movement of markers 100 and 102 relative to markers 94, 96, and 98 is an indicator that distal end 82 is advancing into branch vessel BV while catheter body 66 is advancing in the main vessel MV. For example, as distal end 82 begins to enter into branch vessel BV, markers 100 and 102 will begin to separate from markers 94, 96, and 98...Further, by viewing the position of markers 94, 96, and 98, the operator may determine the position of proximal end 90 and distal end 92 of stent, as well as the position of side hole 88 with respect to the ostium of branch vessel BV.

Clearly this passage, as well as many other passage of the present application, along with the Figures would enable one of skill in the art to make the claimed invention without undue experimentation. Withdrawal of the rejection is respectfully requested.

Claim Rejections – 35 USC § 103

On page 3 of the Office Action, claims 1, 7, 8, 12, 13, 15-19, 42-48, 50-52, 55, 56, 59-70, and 72-74 were rejected under 35 U.S.C. 103(a) as being unpatentable over Wilson et al. (U.S. Patent No. 6,165,195) in view of Ryan et al. (U.S. Patent No. 6,576,009) or Shaknovich (U.S. Patent No. 5,669,924) or Goicoechia et al. (U.S. Patent No. 5,609,627). After careful review, Applicants respectfully traverse this rejection.

Turning to claim 1, which recites:

> 1. (Currently Amended) A catheter system for stent delivery to a vessel bifurcation, the vessel bifurcation having a main vessel and a branch vessel, comprising:
>
> a catheter extending between a distal end and a proximal end, the catheter including a main vessel guidewire lumen that is adapted to receive a main vessel guidewire;
>
> a stent being disposed over the catheter, the stent having a side hole through a wall thereof;
>
> a first catheter radiopaque marker arranged on the catheter distal of the stent;
>
> a second catheter radiopaque marker arranged on the catheter proximal of the stent;
>
> a third catheter radiopaque marker arranged on the catheter aligned with the side hole of the stent;
>
> a side member disposed adjacent the catheter, the side member extending between a free distal end and a proximal end, the side member including a branch vessel guidewire lumen that is adapted to receive a branch vessel guidewire, the side member being fixedly attached to the catheter at a location proximal the stent, the free distal end of the side member arranged to extend through the side hole in the stent to a position distal of the side hole in the stent;
>
> a first side member radiopaque marker positioned on the side member at the free distal end of the side member;
>
> a second side member radiopaque marker positioned on the side member at a location spaced from the first side member radiopaque marker, wherein the second side member radiopaque marker is arranged to be aligned with the side hole of the stent when the free distal end of the side member extends into the branch vessel;
>
> wherein ~~at least one of~~ the first catheter radiopaque marker and the first side member radiopaque marker <u>are arranged side-by-side in a first configuration</u> [[or]] <u>and</u> the third catheter radiopaque marker and the second side member radiopaque marker are arranged side-by-side in a first configuration, wherein the ~~at least one~~ first side member radiopaque marker and first catheter radiopaque marker ~~or second side member radiopaque marker and third catheter radiopaque marker~~ are separated in a second configuration to indicate that the free distal end

of the side member is advancing into the branch vessel.

Nowhere do the cited references appear to teach or suggest many of the elements of claim 1, including for example, "a first catheter radiopaque marker arranged on the catheter distal of the stent", "the side member being fixedly attached to the catheter at a location proximal the stent, the free distal end of the side member arranged to extend through the side hole in the stent to a position distal of the side hole in the stent", "a first side member radiopaque marker positioned on the side member at the free distal end of the side member", and "wherein the first catheter radiopaque marker and the first side member radiopaque marker are arranged side-by-side in a first configuration".

The Office Action relies on Figure 12L of Wilson et al. for support for the claimed side member. With reference to Figure 12L, Wilson et al. appears to teach a main catheter assembly 50 including a guide wire lumen 53A having a distal end 53B with an expandable member 54 adjacent to the distal end 53B. A positioning guide wire lumen 55A is positioned partly on the catheter shaft and partly on the expandable member 54 and is configured for slidably receiving integrated stent-positioning guide wire 56A. (See column 16, lines 11-15). A stent 20 having a side aperture 25 is positioned over the expandable member and the positioning guide wire lumen 55A. The distal end 55B of the position guidewire lumen 55A "terminates in the middle of aperture 25" (column 16, lines 38-39). In this embodiment, a distal guide wire lumen 58 is attached to the balloon 54 outer surface and extends from the aperture 25 of stent 20 to essentially the distal end of the catheter. (See column 16, lines 41-44).

Wilson et al. teaches a method of using the device of Figure 12L in column 17, lines 22-42, which recites:

> In an alternative method of implanting main-vessel stent 20 in main-vessel 6 as depicted in FIGS. 12J-12L, tracking guide wire 41A is advanced through guide wire lumen 55A and guide wire lumen 58 so that it advances distally of the distal end 51 of the catheter. Thus, guide wire distal end 41B is advanced into the main vessel so that it is distal of the side-branch vessel. Guide wire 56A, which until this point has remained within guide wire lumen 53A (see FIG. 12K), is advanced distally as depicted in FIG. 12L and advanced into the main vessel distally of the side-branch vessel. Guide wire 41A is then withdrawn proximally through guide wire lumen 58 until guide wire distal end 41B is able to exit guide wire lumen distal end 55B, as shown in FIG. 12L. Since guide wire lumen 55B is preformed and has bias, it will spring outwardly. Guide wire 41A can then be advanced into the side-branch vessel for further positioning. As the catheter 50 is advanced over the guide wires, distal portion 41B of the guide wire will push against the ostium

of the side-branch vessel thereby insuring the location of main-vessel stent 20, and importantly aperture will align with the opening to the side-branch vessel 5.

From this, it is readily apparent that the distal end 55B of the positioning guidewire lumen 55A is provided at the middle of the aperture 25 of the stent 20. As such, the device of Wilson et al. does not appear to teach or suggest "the free distal end of the side member arranged to extend through the side hole in the stent to a position distal of the side hole in the stent", as recited in claim 1.

The Office Action further states that the other references, namely Ryan, Shaknovich, and Goicoechea, teach that it is known to put multiple markers on the same element in order to determine orientation. However, Applicants assert that merely placing multiple markers on the device of Wilson would not arrive at the claimed invention. As noted above, claim 1 recites "a first catheter radiopaque marker arranged on the catheter distal of the stent" and "a first side member radiopaque marker positioned on the side member at the free distal end of the side member", "wherein the first catheter radiopaque marker (which is on the catheter distal of the stent) and the first side member radiopaque marker (which is at the free distal end of the side member) are arranged side-by-side in a first configuration". Clearly, the device of Wilson et al. does not have a side member with a free distal end that can be side-by-side with a portion of the catheter distal of the stent. As such, modifying Wilson et al. to include multiple markers would not arrive at the claimed invention.

Therefore, for at least these reasons, claim 1 is believed to be patentable over Wilson et al. in view of Ryan et al., Shaknovich, or Goicoechia et al. For similar reasons and others, claims 7, 8, 10, 12, 13, 15-19, and 42-48, which depend from claim 1 and include additional limitations, are believed to be patentable over Wilson et al. in view of Ryan et al., Shaknovich, or Goicoechia et al.

Turning to claim 50, which recites:

> 50. (Currently Amended) A catheter system for stent delivery to a vessel bifurcation, the vessel bifurcation having a main vessel and a branch vessel, comprising:
>
> a catheter having a distal end, a proximal end, and a main vessel guidewire lumen that is adapted to receive a main vessel guidewire;
>
> a stent having a side hole through a wall thereof, the stent being disposed over the catheter, wherein the stent hole is substantially alignable with a branch vessel when the stent hole is disposed substantially in the main vessel prior to expansion;

a first catheter radiopaque marker arranged on the catheter distal of the stent;

a second catheter radiopaque marker arranged on the catheter proximal of the stent;

a third catheter radiopaque marker arranged on the catheter aligned with the side hole of the stent;

a side member disposed adjacent the catheter, the side member having a distal end, a proximal end, and a branch vessel guidewire lumen that is adapted to receive a branch vessel guidewire, the side member being integral with the catheter at a location proximal the stent wherein the distal portion of the side member is disposed at least partially within a portion of the stent and at least partially extending through and distal of the side hole of the stent;

a first side member radiopaque marker positioned on the side member at the distal end of the side member;

a second side member radiopaque marker positioned on the side member at a location spaced from the first side member radiopaque marker, wherein the second side member radiopaque marker is aligned with the side hole of the stent when the distal end of the side member has passed through the side hole and into the branch vessel;

wherein said catheter radiopaque markers and said side member radiopaque markers are moveable from a first configuration to a second configuration, wherein in the first configuration the first catheter radiopaque marker and the first side member radiopaque marker are side-by-side, wherein in the second configuration at least one of the side member radiopaque markers is separated from at least one of the catheter radiopaque markers.

As discussed previously, nowhere do Wilson et al., Ryan et al., Shaknovich, or Goicoechia et al. appear to teach or suggest "a first catheter radiopaque marker arranged on the catheter distal of the stent", "the side member being integral with the catheter at a location proximal the stent wherein the distal portion of the side member is disposed at least partially within a portion of the stent and at least partially extending through and distal of the side hole of the stent", "a first side member radiopaque marker positioned on the side member at the distal end of the side member", and "wherein in the first configuration the first catheter radiopaque marker and the first side member radiopaque marker are side-by-side", as well as many other limitations recited in claim 50. Therefore, for at least these reasons, claim 50 is believed to be patentable over Wilson et al. in view of Ryan et al., Shaknovich, or Goicoechia et al. For similar reasons and others, claims 50-52, 55, 56, and 59-70, which depend from claim 50 and include additional limitations, are believed to be patentable over Wilson et al. in view of Ryan et al., Shaknovich, or Goicoechia et al.

Turning to claim 72, which recites:

72. (Currently Amended) A catheter system for stent delivery to a vessel bifurcation, the vessel bifurcation having a main vessel and a branch vessel, comprising:

a catheter having a distal end, a proximal end, and a main vessel guidewire lumen that is adapted to receive a main vessel guidewire;

a first stent having a side hole through a wall thereof, the first stent being disposed over the catheter;

a first catheter radiopaque marker arranged on the catheter distal of the stent;

a second catheter radiopaque marker arranged on the catheter proximal of the stent;

a third catheter radiopaque marker arranged on the catheter aligned with the side hole of the first stent;

a side member disposed adjacent and fixedly attached to at least one location on the catheter proximal the stent, the side member having a distal end, a proximal end, a branch vessel guidewire lumen that is adapted to receive a branch vessel guidewire, and at least two side radiopaque markers positioned on the side member, a first of the side radiopaque markers being spaced from a second of the side radiopaque markers, wherein ~~at least one of~~ the first catheter radiopaque marker[[s]] and at least one of the side member radiopaque markers are side-by-side in a first configuration and separated in a second configuration; and

a branch stent deployment device having a balloon, a guidewire lumen, an inflation lumen that is adapted to supply a fluid to inflate the balloon, and a branch vessel stent disposed over the balloon, wherein the branch stent deployment device is adapted to be advanced over the branch vessel guidewire;

wherein a distal portion of the side member is disposed within at least a portion of the first stent and extends through the side hole of the first stent to a position distal of the side hole.

As discussed previously, nowhere do Wilson et al., Ryan et al., Shaknovich, or Goicoechia et al. appear to teach or suggest "a first catheter radiopaque marker arranged on the catheter distal of the stent", "wherein the first catheter radiopaque marker and at least one of the side member radiopaque markers are side-by-side in a first configuration and separated in a second configuration", and "wherein a distal portion of the side member is disposed within at least a portion of the first stent and extends through the side hole of the first stent to a position distal of the side hole", as recited in claim 72. Therefore, for at least these reasons, claim 72 is believed to be patentable over Wilson et al. in view of Ryan et al., Shaknovich, or Goicoechia et al.

Turning to claim 73, which recites:

73. (Currently Amended) A catheter system for stent delivery to a vessel bifurcation, the vessel bifurcation having a main vessel and a branch vessel, comprising:

a catheter having a distal end, a proximal end, a main vessel guidewire

lumen that is adapted to receive a main vessel guidewire, and catheter radiopaque markers positioned thereon;

a side member disposed adjacent the catheter, the side member having a distal end, a proximal end, a branch vessel guidewire lumen that is adapted to receive a branch vessel guidewire, and first and second side member radiopaque markers positioned thereon, the side member being integral with the catheter at a location proximal of the catheter radiopaque markers;

a stent having a side hole through a wall thereof being disposed over the catheter, wherein a first of the catheter radiopaque markers is arranged on the catheter distal of the stent, a second of the catheter radiopaque markers is arranged on the catheter proximal of the stent, and a third of the catheter radiopaque markers is arranged on the catheter aligned with the side hole of the stent; and

a branch stent deployment device having a balloon, a guidewire lumen, an inflation lumen that is adapted to supply a fluid to inflate the balloon and a branch vessel stent disposed over the balloon, wherein the branch stent deployment device is adapted to be advanced over the branch vessel guidewire;

wherein a distal portion of the side member extends through the side hole of the stent to a position distal of the side hole along the catheter, and wherein said first and third catheter radiopaque markers and said first and second side member radiopaque markers are juxtaposed in a first configuration and separated in a second configuration.

As discussed previously, nowhere do Wilson et al., Ryan et al., Shaknovich, or Goicoechia et al. appear to teach or suggest "wherein a distal portion of the side member extends through the side hole of the stent to a position distal of the side hole along the catheter, and wherein said first and third catheter radiopaque markers and said first and second side member radiopaque markers are juxtaposed in a first configuration and separated in a second configuration", as recited in claim 73. Therefore, for at least these reasons, claim 73 is believed to be patentable over Wilson et al. in view of Ryan et al., Shaknovich, or Goicoechia et al. For similar reasons and others, claim 74, which depends from claim 74 and includes additional limitations, is believed to be patentable over Wilson et al. in view of Ryan et al., Shaknovich, or Goicoechia et al.

On page 4 of the Office Action, claims 1, 7, 8, 11, 12, 13, 15-19, 42-48, 50-52, 54, 55, 56, 58-70, and 72-74 were rejected under 35 U.S.C. 103(a) as being unpatentable over Wilson, Ryan, Shaknovich, and Goicoechea, as applied to claim 1, and further in view of Dibie (WO 96/34580). Applicants respectfully traverse this rejection.

The Office Action appears to assert that "it would have prima facie obvious to make the Wilson catheter longer and to extend along the stent side to the end for the same reasons Wilson utilizes such a configuration". Applicants respectfully assert that Wilson does not utilize such a

configuration and assumes the Office Action meant to say Dibie instead of the second Wilson. If this assumption is incorrect, Applicants respectfully request clarification in a new Non-Final Office Action.

Applicants respectfully assert that there is no reason to modify the teaching of Wilson et al. with the teachings of Dibie to make the positioning guide wire lumen 55A extend along the side of the stent. As discussed above, with reference to Figure 12L (cited by the Office Action), Wilson et al. appears to disclose the distal end 55B of the position guidewire lumen 55A "terminates in the middle of aperture 25" (column 16, lines 38-39). Further, column 17, lines 22-42 recites:

> In an alternative method of implanting main-vessel stent 20 in main-vessel 6 as depicted in FIGS. 12J-12L, tracking guide wire 41A is advanced through guide wire lumen 55A and guide wire lumen 58 so that it advances distally of the distal end 51 of the catheter. Thus, guide wire distal end 41B is advanced into the main vessel so that it is distal of the side-branch vessel. Guide wire 56A, which until this point has remained within guide wire lumen 53A (see FIG. 12K), is advanced distally as depicted in FIG. 12L and advanced into the main vessel distally of the side-branch vessel. Guide wire 41A is then withdrawn proximally through guide wire lumen 58 until guide wire distal end 41B is able to exit guide wire lumen distal end 55B, as shown in FIG. 12L. Since guide wire lumen 55B is preformed and has bias, it will spring outwardly. Guide wire 41A can then be advanced into the side-branch vessel for further positioning. As the catheter 50 is advanced over the guide wires, distal portion 41B of the guide wire will push against the ostium of the side-branch vessel thereby insuring the location of main-vessel stent 20, and importantly aperture will align with the opening to the side-branch vessel 5.

Thus, modifying the device of Wilson et al. to have the guide wire lumen 55A extend along the side of the stent would not allow tracking guidewire 41A to be advanced through guide wire lumen 55A and guide wire lumen 58 so that it advances distally of the distal end 51 of the catheter. Further, distal end 55B of guide wire lumen 55A would appear to not spring outwardly when the guide wire is withdrawn.

Applicants note that MPEP § 2143.04 states "[i]f proposed modification would render the prior art invention being modified unsatisfactory for its intended purpose, then there is no suggestion or motivation to make the proposed modification. *In re Gordon*, 733 F.2d 900, 221 USPQ 1125 (Fed. Cir. 1984)". The MPEP further states "[i]f the proposed modification or combination of the prior art would change the principle of operation of the prior art invention being modified, then the teachings of the references are not sufficient to render the claims *prima*

facie obvious. *In re Ratti*, 270 F.2d 810, 123 USPQ 349 (CCPA 1959)". As such, there is clearly no motivation or reason to modify the guide wire lumen 55A of Wilson et al. with the teachings of Dibie.

Further, it is axiomatic that "because they can be" combined clearly fails to establish a proper *prima facie* case of obviousness. Under KSR, there must be some reason to make the claimed combination. The Supreme Court in *KSR Int'l Co. v. Teleflex Inc.* quotes *In re Kahn*, 441 F. 3d 977, 988 (CA Fed. 2006) stated:

> "[R]ejections on obviousness grounds cannot be sustained by mere conclusory statements; instead, there must be some articulated reasoning with some rational underpinning to support the legal conclusion of obviousness".

(Emphasis added)(see page 14 of the April 30, 2007 decision). The Court further stated:

> a patent composed of several elements is not proved obvious merely by demonstrating that each of its elements was, independently, known in the prior art.

(see page 14 of the April 30, 2007 decision). It appears that the Office Action has merely found several elements of the claim in the prior art and has made a conclusion of obviousness without any articulated reasoning with some rational underpinning to support the conclusion. Applicants submit that the only motivation reason for combining Wilson et al. and Dibie in the manner suggested by the Office Action appears to come from Applicants' own specification, which is clearly improper.

Further, as discussed previously, even if the teachings of Wilson et al. and Dibie can be combined, nothing in any of the cited reference appear to teach or suggest the claimed marker configurations.

Therefore, for at least these reasons, claim 1 is believed to be patentable over Wilson, Ryan, Shaknovich, Goicoechea, and Dibie. For similar reasons and others, independent claims 50, 72, and 74 are believed to be patentable over Wilson, Ryan, Shaknovich, Goicoechea, and Dibie. For similar reasons and others, claims 7, 8, 11, 12, 13, 15-19, 42-48, 51-52, 54, 55, 56, 58-70, and 73, which depend from one of claims 1, 50, 72, and 74 include additional distinguishing features, are believed to be patentable over Wilson, Ryan, Shaknovich, Goicoechea, and Dibie.

On page 5 of the Office Action, claim 14 and 57 were rejected under 35 U.S.C. 103(a) as

being unpatentable over Wilson, Ryan, Shaknovich, and Goicoechea, as applied to claim 1, and further in view of Davila et al. (U.S. Patent No. 5,851,464). After careful review, Applicants respectfully traverse this rejection. As discussed previously, claims 1 and 50 are believed to be patentable over Wilson, Ryan, Shaknovich, and Goicoechea. Nothing in Davila et al. appear to remedy the noted shortcomings. Therefore, for at least these reasons, claims 14 and 57, which depend from one of claims 1 and 50, are believed to be patentable over the cited references.

List of Copending Applications Requested by the Examiner

On Page 6 of the Office Action, the Examiner made the following request: "Applicant is respectfully requested to provide a list of all copending applications that set forth similar subject matter to the present claims. A copy of such copending claims is respectfully requested in response to this Office action if the application is not stored in image format (i.e. the IFW system) of published."

Applicants respectfully thank the Examiner for the courtesies extended during the telephone conversation with the Applicants' representative on June 24, 2009 to help clarify this request. Applicants have hereby provided a list of copending applications and/or patents that may include claim(s) directed towards a bifurcated system having radiopaque markers and that have at least one common inventor and/or are commonly assigned/owned, all of which have been or are contemporaneously cited in an IDS in the current application.

Serial No.	Patent/Pub. No.	Applicants' File No.
10/083,707	2002/0193873	1001.2256101
10/757,646	2005/0154442	1001.2263101
10/785,449	2005/0187602	1001.2265101
09/455,299	6,692,483	1001.2273101
09/860,744	7,387,639	1001.2273104
10/762,562	2005/0245941	1001.2273105
12/140,900	2008/0255581	1001.2273106
09/816,690	6,682,536	1001.2275101
09/794,740	6,884,258	1001.2276101
11/677,337	2007/0203562	1001.2291101
12/136,290		1001.2306101

12/197,960	1001.2307101
12/184,487	1001.2310101

Applicants also refer the Examiner to the 1449s cited in this Application. If the Examiner would like any further information, or finds this response not in accordance with the Examiner's intent, Applicants respectfully request that the Examiner contact the Applicants' representative for further clarification.

Conclusion

In view of the foregoing, all pending claims are believed to be in a condition for allowance. Further examination and withdrawal of the rejections is respectfully requested. Issuance of a Notice of Allowance in due course is anticipated. If a telephone conference might be of assistance, please contact the undersigned attorney at (612) 677-9050.

Respectfully Submitted,

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